PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with opplicable fee(s), to: Mail Mail Stop ISSUE E Commissioner for Patents P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

manifectance ree normeat	tons.					erate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
466	7590 11/14	/2008	h			
YOUNG & THOMPSON 209 Madison Street Suite 500 ALEXANDRIA, VA 22314				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated befow.		
ALEAANDRIA,	VA 22314					(Depositor's name)
						(Signature)
<u> </u>						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED IN VENTO)R	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/541,357 TITLE OF INVENTION:	01/23/2006 ACTIVATION OF TR	ACKING DEVICE	Dominic Hyde		1503-1060	. 1118
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSUE	T NOTE TO THE PROPERTY OF THE PARTY OF THE P	
nonprovisional	NO NO	\$1510	\$300		<u>-</u>	
<u> </u>		·	γ	\$0 	\$1810	02/17/2009
EXAME		ART UNIT	CLASS-SUBCLASS			
LABBEES, EDNY 2612 1. Change of correspondence address or indication of "Fee Address" (37			340-539130			
CFR 1.363).		nge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
		TO BE PRINTED ON				
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGENVIROTAINI	NEE		(B) RESIDENCE: (CITY and STATE OR COUNTRY) KNIVSTA, SWEDEN			
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🕱 Corporation or other private group entity 🚨 Government						
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
✓ Issue Fee				l.		,
Advance Order - #	ermitted)	The Director is here overpayment, to De	☑ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 250120 (enclose an extra copy of this form).			
5. Change in Entity Statu		•	(IF NECESSARY)			
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party						
nterest as snown by the re	cords of the United Sta	ics Patent and Trademark	Office.		and a distance of agent, or a	re dadigitee of other party in
	Benoît	Castel	Date January 26, 2009			
Typed or printed name Benoit Castel			Registration No. 35,041			
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) in application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.						
Judge the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.						